

# Module 8: Other Activities

# Module Objectives

**After this module, you should be able to:**

- List some of the key features of TRICARE Plus
- Explain the ECHO benefit and who is eligible for it
- Describe the CAP Program
- Explain the US Family Health Plan



# TRICARE Plus

- TRICARE Plus is a program that allows beneficiaries who normally are only able to get care at a military treatment facility (MTF) on a space-available basis to enroll and receive primary care appointments at the MTF within the same primary care access standards as beneficiaries enrolled in a TRICARE Prime option
  - TRICARE Plus is not a health plan; it is simply a way to access primary care at MTFs
- TRICARE Plus is only available at certain MTFs, and the local MTF commander may limit enrollment to specific categories of beneficiaries
- TRICARE beneficiaries enrolled in a Prime option (overseas or stateside), a civilian HMO, or Medicare HMO are not eligible to enroll in TRICARE Plus
- TRICARE Plus is not a portable benefit, meaning that enrollment into TRICARE Plus at one MTF does not automatically extend enrollment to another MTF



# TRICARE Plus

## Eligibility

- TRICARE Standard beneficiaries
- Retirees and retiree family members using TRICARE For Life

## Coverage

- Beneficiaries should contact their local military treatment facility to find out if they may participate in TRICARE Plus; TRICARE does not administer this program
- If available, the beneficiary's enrollment in TRICARE Plus will be reflected in DEERS
- TRICARE Plus does not guarantee access to specialty care at the MTF
  - If referral to civilian care outside of the MTF is required, TRICARE Standard rules will apply
- There are no out of pocket costs for enrollment in TRICARE Plus



# Extended Care Health Option Program

- The Extended Care Health Option (ECHO) is a supplemental program to the basic TRICARE program
- ECHO provides financial assistance for an integrated set of services and supplies to qualified active duty family members (including family members of activated National Guard or Reserve members)
- Extended Care Health Option (ECHO) benefits may include:
  - Medical and rehabilitative services
  - Training to use assistive technology devices
  - Special education
  - Institutional care when a residential environment is required
  - Transportation to receive authorized ECHO benefits under certain circumstances
  - Assistive services, such as those from a qualified interpreter or translator
  - Durable equipment, including adaptation and maintenance
  - In-home medical services through ECHO Home Health Care (EHC) \_
  - In-home respite care services



# Extended Care Health Option Program

## Eligibility

- TRICARE ECHO provides financial assistance **only** for active duty family members with specific qualifying mental or physical conditions, including:
  - Diagnosis of a neuromuscular developmental condition or other condition in an infant or toddler expected to precede a diagnosis of moderate or severe mental retardation or serious physical disability
  - Extraordinary physical or psychological condition causing the beneficiary to be homebound
  - Moderate or severe mental retardation
  - Multiple disabilities (may qualify if there are two or more disabilities affecting separate body systems)
  - Serious physical disability



# Extended Care Health Option Program

## Eligibility

- Eligible beneficiaries must be enrolled in the Exceptional Family Member Program (EFMP) based on Service guidance
- Each service branch has its own EFMP and enrollment process
  - Under certain circumstances, this requirement may be waived
- If a sponsor believes a qualifying condition exists, they should call their regional contractor to determine eligibility
- If overseas, beneficiaries should contact their MTF or TRICARE Area Office



# ECHO Cost Shares

- Sponsors must pay part of the monthly expenses for authorized Extended Care Health Option benefits
- The monthly cost share is based on the sponsor's pay grade as shown in the chart below
- The monthly cost share is only one fee per sponsor, not per ECHO beneficiary
- ECHO beneficiaries only pay the cost share if they use ECHO benefits during that calendar month

Sponsor Pay Grade	Sponsor Cost Share Amount
E-1 to E-5	\$25
E-6	\$30
E-7, O-1	\$35
E-8, O-2	\$40
E-9, WO/W-1 , CWO-2 and O-3	\$45
CWO-3, CWO-4, O-4	\$50
CWO-5, O-5	\$65
O-6	\$75
O-7	\$100
O-8	\$150
O-9	\$200
O-10	\$250





# Computer/Electronic Accommodations Program (CAP)

- The Computer/Electronic Accommodations Program (CAP) provides assistive technology and services to people with disabilities, Federal managers, supervisors, and IT professionals
- CAP increases access to information and works to remove barriers to employment opportunities by eliminating the costs of assistive technology and accommodation solutions
- CAP's mission is to ensure that people with disabilities have equal access to information, environment, and opportunity in the DoD and throughout the Federal government
- Congress granted CAP the authority to provide assistive technology, devices, and services free of charge to Federal agencies that have a partnership agreement with CAP
- The TRICARE Management Activity, a field activity in the Office of the Assistant Secretary of Defense (Health Affairs), serves as the executive agent for CAP



# Computer/Electronic Accommodations Program (CAP)

## Eligibility:

- Federal employees with disabilities
- Wounded service members
- Federal managers, supervisors, and IT professional

If a person has a disability and is employed by a component of the Department of Defense (DoD), or one of the federal agencies that has a partnership with CAP, they are eligible for CAP services.

## CAP provides:

- Assistive technology to increase access to the computer and telecommunications environment
- Individualized needs assessments
- Demonstration and evaluation of assistive technology
- Installation, integration and training
- Disability education and awareness
- Section 508 training

To learn more about CAP, visit [www.tricare.mil/cap](http://www.tricare.mil/cap)



# Uniformed Services Family Health Plan

## (USFHP)

- US Family Health Plan is a TRICARE option
- The US Family Health Plan was selected by the Department of Defense to be a provider of TRICARE Prime and has served the health care needs of military beneficiaries since 1993, under an earlier contract with the DoD
- US Family Health Plan members receive all the benefits offered by the DoD's TRICARE Prime program, plus additional advantages and features at no extra cost
- Beneficiaries must be enrolled in the Defense Eligibility Reporting System (DEERS) and live within USFHP service area as determined by zip code



# Uniformed Services Family Health Plan (USFHP)

## Eligibility:

- Certain former active duty service members, including Guard/Reserve and their family members during the Transitional Assistance Management Program (TAMP) period
- Active duty family member spouses
- Active duty family member unmarried dependent children until age 21 or 23 if enrolled in school full-time
- U.S. uniformed services retirees
- U.S. uniformed services retiree family members, including un-remarried Survivors
- Eligible un-remarried former spouses of active duty or retired service members

## Enrollment:

- Open year round
- Eligible beneficiaries must complete a DD Form 2876 to enroll
- Coverage begins on the first day of the month following receipt of the application
- There are no enrollment fees for active duty family members or for beneficiaries who are enrolled in Medicare Part B



# Uniformed Services Family Health Plan (USFHP)

## Costs:

- Active duty family members pay no enrollment fees and no out-of-pocket costs for any type of care as long as care is received from the US Family Health Plan provider
- All other beneficiaries pay annual enrollment fees (\$230/year for individuals or \$460/year for families)
- Cost for care is based on where the care is received
  - Retirees and their families not enrolled in Medicare Part B pay the same  
\$230 individual/\$460 family enrollment fees paid by TRICARE Prime  
retirees and their family members



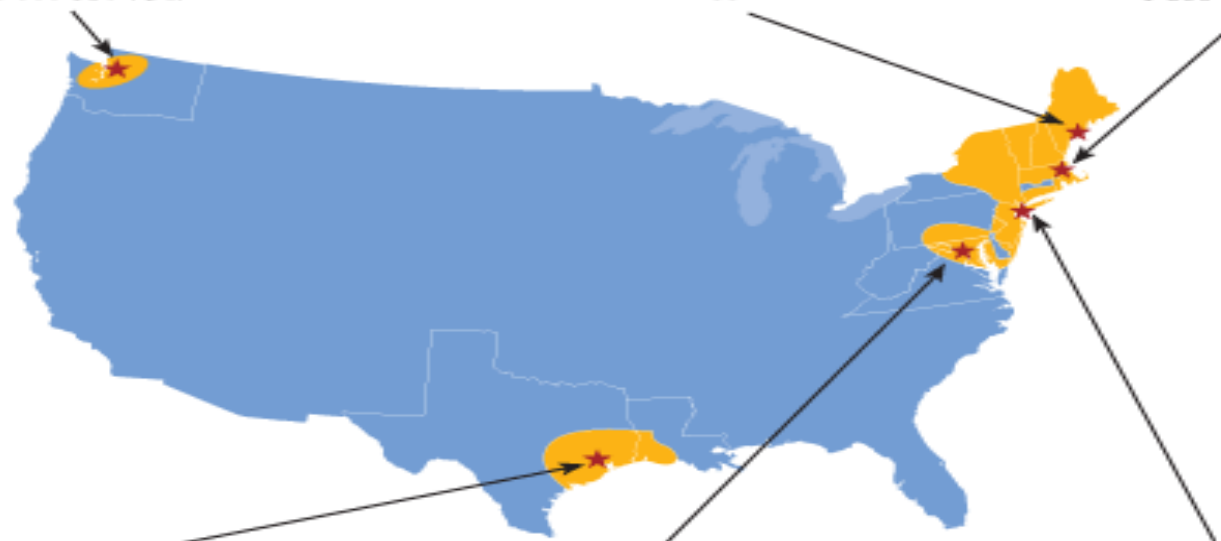
# Uniformed Services Family Health Plan (USFHP)

Eligible beneficiaries can enroll in USFHP at one of the designated US Family Health Plan providers listed below.

**Pacific Medical Centers  
(PacMed Clinics)**  
Serving the Puget Sound area  
of Washington State  
1-888-958-7347

**Martin's Point Health Care**  
Serving Maine, Vermont,  
New Hampshire and  
northeastern New York  
1-888-241-4556

**Brighton Marine Health Center**  
Serving Massachusetts, including  
Cape Cod, Rhode Island and  
northern Connecticut  
1-800-818-8589



**CHRISTUS Health**  
Serving southeast Texas and  
southwest Louisiana  
1-800-678-7347

**Johns Hopkins Medicine**  
Serving central Maryland, Washington  
DC and parts of Pennsylvania, Virginia  
and West Virginia  
1-800-808-7347

**Saint Vincent Catholic  
Medical Centers**  
Serving parts of New York, all of  
New Jersey, eastern Pennsylvania  
and southern Connecticut  
1-800-241-4848

Visit [www.usfhp.com](http://www.usfhp.com) for more information



# **You've Completed Module 8: Other Activities**

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